DMHAS ADMISSION PROTOCOL

When we admit new patients what should we do to ensure they don't bring COVID-19 infection to our unit?

Note:

- Individuals who are fully vaccinated against COVID-19 (2 or more weeks have passed since the last dose of vaccination) are at low risk to contract or transmit COVID-19 infection and are exempt from the restrictions of this protocol. When You've Been Fully Vaccinated | CDC
- Individuals who have clinically recovered from a COVID-19 infection and are asymptomatic are not considered infectious and have very low risk of re-infection with COVID-19 for a period of 90 days from onset of symptoms. They are exempt from restrictions of these protocols within this period and should not be tested except when they become symptomatic, at which time they should be tested.
- A) New admissions from the community should be tested for COVID-19 at admission. Admissions from another hospital or DOC should be tested for COVID-19 at the referring hospital before transfer.
- B) New admissions should be quarantined at least until the result of the test is obtained. Those that test positive will be placed in appropriate isolation space. Those that test negative will be placed in quarantine for 10 full days.
- C) If cohorting of patients have occurred in response to an outbreak of COVID-19
 infection, new admissions will be tested and placed on a unit commensurate with the
 result of the tests.
- D) For patients transferred from an acute care hospital or DOC, who had been in those facilities for longer than two consecutive weeks and tested COVID-19 negative before and soon after admission to DMHAS hospital facility, the following procedure should be instituted as for all admissions:
 - Testing all patients on admission. If positive, place in designated isolation space. If negative, place in quarantine for 10 days. Re-test patients on day 7, if still negative, discontinue quarantine after 10 full days and place patient on designated unit.

However, an alternative procedure could be considered appropriate after discussion with the DMHAS Medical Director. If the risk of infection is considered low and there is no quarantine space, patient may be placed directly on a designated unit and re-tested on day 5 after admission.

Adapted from:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

- E) At any time if a newly admitted patient who has tested negative for COVID-19 cannot remain in quarantine due to clinical or physical space issues, a consultation with the DMHAS Medical Director will be requested. Upon review the Medical Director will determine, based on the level of risk to the patient and others on the unit, whether the patient needs to remain in quarantine for the remainder of the 10 days, and/or if there is a need to conduct more frequent COVID -19 testing of the patient as well as other patients and staff on the unit. The rationale for the decision will be documented in the patient Medical Record.
- F) A newly admitted asymptomatic patient who has recovered from COVID-19 infection and is within 90 days of onset of symptoms should be admitted directly to designated unit without quarantine or testing. However, should the patient develop symptoms, place patient in quarantine and test for COVID-19. If positive, place in isolation unit. If negative, return to unit.

Adapted from: https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html

• G) In general, new admits should not be admitted to units on COVID quarantine, except the patient is fully vaccinated or recovered from COVID-19 infected within the last 90 days.

Note: In all situations, the following additional interventions will apply:

- Monitoring for symptoms of COVID-19 every shift
- Vital signs, including temp and pulse ox, every shift
- Facemask worn by staff and patient (if possible)
- Frequent hand hygiene
- Face shield or eye goggles worn by staff https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html